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APPLICANTS

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** CONTINUING DATA *****

NONE - SE

** FOREIGN APPLICATIONS *****

NONE - SE

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 9	TOTAL CLAIMS 94	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials <i>SE</i>				

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